

Waterway Analysis & Management System
Questionnaire for the Pensacola Ship Channel and Pensacola Bay

Name/Company:		
Phone:	Contact Person: _	
Please use	back of page if additional spa	ace is needed
1. Vessel type used: <i>Length</i> :	Draft:	Tonnage:
2. Navigational Equipment used:		
3. How often due you transit at nigh	nt during any given mont	th?
4. What is your primary means of n GPS, Radar)	_	•
5. What is your principal cargo? (i.e	e. petroleum, dry goods,	personnel)
6. What Lateral Aids to Navigation Daybeacons, Lights)	_	•
•		
		nere and explain?

9. Have you had problems with charts and pubs?		
10. Do you know of any specific danger/safety problems/issues? (shoals, hazards to navigation)		
11. What are your recommendations for improvements or adjustments?		
11. What are your recommendations for improvements of adjustments.		

## Your assistance in this matter is greatly appreciated!

Please mail your responses to, or contact:

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e-mail: pball@cgccypress.uscg.mil 251-441-6277 (w)

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